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ABSTRACT

Over the last 15 years, parent education programs have emerged that teach parents what they need to know and do in order to put their children at a psychosocial advantage in society. The Culturally Adapted Parent Training Project, initiated by the Center for the Improvement of Child Caring, was developed to adapt existing programs to meet the needs of low income black families. The project began by assessing parenting textbooks in terms of appropriateness for black parenting issues. This assessment was substantiated by data from parent interviews. The first adaptation created a rationale for participation by black parents in the parenting program, including the Pyramid of Success, which identified five life goals for black children: (1) loving relationships, (2) good jobs, (3) good education, (4) helping the black community, and (5) resisting the pressure of the street. The second adaptation related skills taught to parents to help them advance their children towards life goals. The National Institute of Drug Abuse has supported these efforts by funding a 3-year research grant to test the effectiveness of the adapted program. It is hoped that these types of activities will help to raise the consciousness of black parents, empower them by providing them with skills and information on parenting, and outline the goals and commitments necessary to strengthen black families. (HOD)

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PARENTING PROGRAMS FOR BLACK PARENTS

by

Kerby T. Alvy, Ph.D.

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June 1985

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This paper served as the basis for Dr. Alvy's presentation at the 1985 Vermont Conference on the Primary Prevention of Psychopathology which was sponsored by the National Institute of Mental Health. The paper will be published as a chapter in a book that emanates from that conference.

The conference took place at the University of Vermont, Burlington, Vermont, on June 5-8, 1985, and was called "Families in Transition: Primary Prevention Programs That Work."

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I Introduction

Educating parents to promote their children's welfare and development is a venerable idea that has recently taken on new forms, new urgencies and new critics. The idea dates back to the 1800s and we Americans have evolved a variety of parent education activities and programs that have been offered through a variety of institutions (Brim, 1965).

Over the last fifteen years, a particular type of program has received special attention. These are the parenting skill-building programs that are being taught to small groups of parents in agencies, schools, churches and homes. These programs emphasize positive and accepting attitudes toward children. They use a variety of role playing and multi-media techniques to teach parents how to use basic reinforcement, problem solving and communication skills to deal with a wide range of child rearing problems and challenges.

Several of these programs are being used in different communities throughout the United States and have taken on the status of standard parent training interventions. Some of the more widely used programs include the Rogerian psychology-

oriented Parent Effectiveness Training program created by Dr. Thomas Gordon (1970, 1975, 1976), the Adlerian-oriented Systematic Training for Effective Parenting program by Drs. Dinkmeyer and McKay (1976), and various behaviorally-oriented child management programs such as those created by Drs. Gerald Patterson (1971, 1975, 1976), Wesley Becker (1971), and Robert Aitchison (1976; Eimers and Aitchison, 1977).

These programs emerged primarily out of the mental health field and they represent an attempt to share with parents the skills and attitudes that mental health practitioners have found useful in relating to children. The accepting attitudes and positive practices which these programs teach are very similar to those which the research literature on parent-child relations has found to be related to high self-esteem and stable social adjustment in children (Coopersmith, 1967; Maccoby and Martin, 1983; Martin, 1975). Thus, these programs appear to teach parents many of the things they need to know and do in order to put their children at a psychosocial advantage in our society.

This new parent training technology came into existence at a time when many voices were calling for more and better parent training. In the early 1970s the Joint Commission on the Mental Health of Children stressed the need to establish more preventive services like parent training (Mental Health of Children, 1973). In the mid-1970s another federally supported study revealed that parent training was considered by child mental health experts to be the number one community service to promote the mental and

emotional development of America's children (Mitre Corporation, 1977).

Also in the 1970s our country began to acknowledge the widespread abuse and neglect of children by their parents. The growing awareness of this tragedy led authorities in the child welfare fields to advocate for parent training as a primary strategy for preventing child abuse (Alvy, 1975a; Fontana, 1973; Gil, 1973; Helfer and Kempe, 1974, 1976). Federal agencies like the National Center on Child Abuse and Neglect (DHEW, 1976 a,b,c) and other national organizations like the Education Commission of the States (1976) echoed this plea.

Juvenile delinquency authorities have also looked to parent training as a promising prevention strategy (Fraser and Hawkins, 1982). Research on delinquency has implicated poor parent-child relations and poor family management as contributing factors, and training parents has much appeal(Patterson and Stouthamer-Loeber, 1984).

Research on the etiology of substance abuse has also revealed a linkage between ineffective parenting and alcohol and drug abuse. The national institutes that focus on these enormous problems have also advocated for parent training as a prevention strategy (NIAAA, 1983; Rose, Battjes and Leukefeld, 1984).

Thus, parent training is now seen as a prevention approach that can impact on a wide range of social and health problems. The practitioners and service engineers that must deal with these pressing and costly problems on a day-to-day basis are clear that

parent training is a necessary component of any comprehensive prevention plan. In addition they see parent training as an essential component of treatment plans.

These individuals are also critical of the existing parent training technology. They note that the standard programs are designed primarily for white middle class parents and they need to be reworked or adapted for ethnic minority and low income populations (Alvy, 1981,b; Mitre Corporation, 1977). Our organization, the Center for the Improvement of Child Caring, has responded to this need and has begun evolving culturally-adapted versions for black and Hispanic parents (Alvy, Fuentes, Harrison and Rosen, 1980) and the majority of this paper will be devoted to describing the development and current status of adapted programs for black parents.

Criticism has also been directed at the standard programs for being too complex for use with highly dysfunctional and abusive families, though some practitioners do report successful outcomes in using these programs with abusive parents (Martin and Beesley, 1976). Others have created special program versions just for abusive parents (Bavolek, Comstock, and McLaughlin, 1983; Schuster, Amdurer, Fallon and Hare, 1981; Wolfe, Kaufman, Aragona and Sandler, 1981).

In addition to these types of program criticisms, the practitioners and service engineers have also noted that very few persons who work in family-serving public agencies have been trained to deliver and evaluate these programs. This criticism

has spoken to the need for developing instructor training programs. Our organization has responded in this area also, and we have developed and field tested a model training program for preparing mental health, social service and educational personnel for delivering parenting skill-building programs through their agencies and schools (Alvy and Rubin, 1981; Alvy and Rosen, 1984). That model currently serves as the basis for proposed legislation in California (Assembly Bill 251, The Parent Development Act of 1985) that could result in statewide instructor training of human service personnel.

Advocates and critics of the skill-building programs have also raised questions about their effectiveness, and there have been hundreds of evaluation studies and several literature reviews of these studies (Atkeson and Forehand, 1978; Berkowitz and Graziano, 1972; Cobb and Medway, 1978; Croake and Glover, 1977; Eyeberg and Johnson, 1974; Moreland, Schwebel, Beck and Wells, 1982; Reisinger, Ora and Frangia, 1976; Rinn and Markle, 1977; Tramontana, Sherrets and Authier, 1980; Tavormina, 1980). Issues regarding the value and effectiveness of these programs have also been raised in the many parent training survey books that have been published recently (Abidin, 1980; Arnold, 1978, Dangel and Polster, 1984; Fine, 1980; Harmon and Brim, 1980; Haskins and Adams, 1983; Kaplan, 1980; Mash, Handy and Hamerlynck, 1976).

Results of the evaluation studies have been generally positive but they have left many questions unanswered. The

behaviorally-oriented child management programs seem to be the most consistently effective programs in terms of teaching parents reinforcement ideas and skills which they use to modify their children's behaviors, and these programs have received the most research attention and support. The communication skill training programs have shown positive results in some studies but not in others. It is unclear from these studies which type of parent, or which type of parent-child dyad, or which type of families benefit most from the various programs. It is clear, however, that some parents in some programs appear to gain a great deal from participating. We know from our own studies that some parents transform their relationships with their children in very dramatic ways as a result of participating in parenting skill-building programs, while others do not (Alvy, Rosen, Harrison and Fuentes, 1980; Timnick, 1980).

The lack of clear results from all of these studies is greatly a product of the inherent complexity and costliness of conducting quality research on the effectiveness of group parent training programs. There is such a wide array of relevant variables that beg for control and examination that it is almost impossible to make clear statements unless you have measured all of these variables.

There are many, many program variables. The programs differ in terms of theoretical or philosophical underpinnings. Even within the same theoretical approach, such as in the behaviorally-oriented child management approach, there are many

program versions of the approach which teach a different blend of parenting ideas and skills. Other programs that represent different approaches not only vary in terms of content but also in terms of teaching methodology and instructor role and qualifications. The programs also differ in terms of the amount or length of training that they provide, though most of these programs run for only one three hour session a week for two or three months.

There are important implementation variables to consider. These programs are offerred under an array of institutional auspicies, including through court referral. Parents in some programs pay for the services while others do not. Some programs offer incentives for participation and attendance. Getting parents into these programs is often an arduous and time consuming task. These programs compete for parental attention with the entertainment and sports media, with the need for relaxation, and with many other family and personal matters that often make going to a parent training class a rather low priority.

Then there is the wide range of subject variables that should impact on the effectiveness of these programs and which need to be examined. The age and stage of development of the parents' children are important factors, as are the children's personality, intellectual and behavioral styles. Since these programs are designed to help parents in guiding their children's development, their children's developmental characteristics are

obviously of major importance. And so are the individual characteristics of the parents, their personality and intellectual capacities. Related subject variables that are also pivotal include the family structure, whether nuclear, single or blended. The parent's and family's socioeconomic status, religion and ethnicity are important variables, as is marital harmony or disharmony, and the various environmental stresses that the participating families might be experiencing.

Further complicating factors are group composition and group dynamic factors. No two parent training groups are alike because no two groups have the exact same mix of parent and child characteristics. The dynamics of each group also differ, and instructor and parent characteristics interact to make each group experience unique in its own right.

Given these inherent complexities and given the costs that would be involved in accounting for all the relevant variables, it is no wonder that the results of the available studies are not as clear as would be desireable. More extensive and intensive research is needed, especially now that parent training is being seen as pivotal in ameliorating so many costly and tragic social and health problems.

In turning now to a description of how we went about adapting standard parent training programs for black parents, I will also report on a recently funded study to further research the effectiveness of the adapted programs. This new study holds the promise of providing clearer results, since it measures a

wider range of relevant variables.

II Development of Black Parent Training Programs

The journey that led to the creation of the programs for black parents was very personal. It was a journey through the racial mine fields in our country that keep people of different color from getting to know each other and from appreciating our common humanity. It was a highly personal and socially revealing journey that could only happen in America.

A. Program Context and History

It began in 1970 when this white psychologist, the son of Jewish immigrants, received his doctorate and was pursuing employment in Los Angeles. I had several opportunities to work in established and prestigious white institutions but I chose to take a position in the newly formed community mental health center in Watts where I was one of the only two white persons on a staff of 50 professionals and paraprofessionals. By that time in my life I had developed strong convictions about human rights and fairness, and Dr. Martin Luther King embodied the values and vision that I had come to cherish. Working in Watts was the right thing for this white man to do and it provided a profound postdoctoral education.

As a clinical child psychologist in the children's service,

I spent most of my time with black children and their parents. After working with one black parent after another who was struggling to maintain positive relationships with their children and to raise them in the best way possible, I was struck by the simple fact that they had received no formal education or training to help them. This seemed ironic, given the fact that I had just received an extensive education to learn how to be most productive in relating to children. Yet I was with the children and parents only one hour a week, and they were with each other every day. It seemed to me that the wrong people were being trained.

This realization led me to find ways of sharing with black parents what I knew about relating to children and I looked into the parent training materials that were available at that time. I found several parent training manuals and programs but none dealt specifically with the issues and challenges that were particular to black parents. I wasn't even sure at that time how to conceptualize the issues but I knew that the existing programs did not even attempt to address them.

I began using the existing materials to run training sessions with the parents and the parents were very receptive. Many of the parents were relieved that they could be taught skills and procedures that would improve their relationships with their children. Some were desperate and were eager to try whatever might work to turn around a strained and troublesome relationship. Their desperation not only stemmed from the

tragedy of not being able to relate to their own children but from their children's problems at school and in the community. Some were not as receptive, as their relationships with their children had deteriorated so greatly that they were unwilling to do much about it. But none of the black parents who were involved in these training sessions even mentioned that what they were being instructed to do with their children could be considered as white folks' ways. This didn't come up as an issue. What seemed to matter to these black parents was that what they were learning was helpful.

But it did matter to many of the black staff members of the agency and they let this be known in very critical and racially charged ways. It was not that they were critical about the activity of educating black parents to be more effective. Their criticism was with the fact that a white man using "white ideas" was training black parents to raise black children. In the heat of this type of criticism there was no time or opportunity to explore the issues or to get beyond the surface of things.

This experience further alerted me to question the cultural fit of the existing programs and parenting ideas, and to realize that something should be done to make them more acceptable and relevant. The first attempt was in developing a job training program for low income black parents, Indigenous Mental Health Workers for Childrens Services (Alvy, 1975b). This program was funded by grants from the National Institute of Mental Health and the Department of Labor. It consisted of training unemployed

black parents to use the reinforcement skills of the then-existing parent training programs in their counseling of children who were referred to the mental health center and in their relationships to their own children. This program prepared black parents for human service jobs and the majority of graduates found employment in mental health or educational settings. The program, however, did not deal with adapting the parenting skills to the black experience. Whatever adaptations took place were the result of the parents' themselves making intuitive changes.

It was in 1974 during the conduct of this program that the Center for the Improvement of Child Caring (CICC) was founded. I had been asked to testify at a California senate hearing on child abuse and I had suggested that widescale parent training was a good prevention approach. My testimony was picked up by the local and national media, and I was contacted by a private foundation to explore my ideas. I was asked what type of institution should be created to help with these problems and this question stimulated me to evolve the basic ideas and values of CICC. Then along with some colleagues and family members, we founded CICC as a private, non-profit service, research and training corporation.

CICC is a multi-ethnic organization that is based on values that all children have rights to the opportunity to fulfill their developmental potential. Secondarily, and as one of many strategies for insuring that the rights of children are upheld and fostered, we also believe that parents and other caregivers

have rights to receive the best education, training and support. In terms of programmatic objectives, we committed ourselves to developing and refining programs and opportunities for parents and other caregivers to improve and enhance how they care for children. Part of this self-imposed mandate included the idea of adapting current parent training programs to the unique history, needs and characteristics of ethnic minority parents.

It was four years after the founding of CICC that this idea took programmatic shape. Between 1974 and 1978, CICC was involved in delivering parenting programs with a wide array of parents, including black parents. It was also during this time that we began to develop the national model for training parenting instructors which I mentioned earlier (Alvy and Rubin, 1981; Alvy and Rosen, 1984). We had received a training grant from NIMH and we were in the process of training over one hundred instructors to deliver standard parent training programs through their agencies. We also were conducting research on the effectiveness of the standard, non-adapted programs with low income ethnic minority parents.

Then in 1978 I was asked to speak at an NIMH-supported conference in Louisiana on Improving Mental Health Services for Blacks in the South. There I met Dr. James R. Ralph who was the head of NIMH's Minority Group Mental Health Center and we discussed the need to adapt the standard programs for ethnic minorities. Dr. Ralph encouraged me to meet with the leaders of the NIMH-supported minority group research centers in Los Angeles

to evolve such a project. The meetings were very exciting and key individuals from the black and Hispanic centers worked closely with us to develop the project, which we called Culturally-Adapted Parent Training (Alvy, Fuentes, Harrison and Rosen, 1980). The project proposal was reviewed at NIMH by a committee of ethnic minority mental health authorities, and it was approved for three years of funding beginning in September of 1979.

B. Important Issues

Before describing this project and its results, I would like to share with you some key issues and problems that are involved in such an undertaking.

When you take on the task of designing parenting programs, you are operating in very sensitive areas. Parent training deals directly with how individuals and groups rear their children, and it is through child rearing that many of our most cherished personal, religious and cultural values are transmitted. Choosing to focus on parent training is a choice to confront our society's most personal and possibly most important activity.

When the focus is on parenting programs for ethnic or racial groups that have been persecuted and oppressed, the task takes on an additional meaning. Blacks and other groups have managed to survive the most opprobrious inhumanities because of the strengths of their families and their will to overcome. When you

talk about programs to impact black families, you are talking about influencing the same social units that have provided the intimate support that nurtures the will to overcome. And you better be damn sure that what you are proposing will enhance that capacity to overcome.

Assuming that what you have to offer will indeed be helpful, you are then faced with the complex task of adapting or designing programs that address parenting themes that are relevant to the black experience in America. And in so doing you must be knowledgeable about and respectful of the diversity of black experiences in America and of the diversities within black communities.

Though the majority of blacks live in poverty or on the margins of poverty, there is socioeconomic diversity in the black community. There are black business leaders, doctors, lawyers, and scholars. The educational and material resources that these individuals can bring to child rearing are markedly different than what their impoverished brothers and sisters can. This diversity has many implications for designing parenting programs.

Fully one half of all black children in America are now growing up in single parent families headed by women (Children's Defense Fund, 1985) and this fact has many implications for designing and implementing parenting programs. Programs for black parents must address the special issues of single parenthood in order to be relevant.

There are diversities of outlook and opinion regarding

cultural issues that need to be considered. While most blacks share a special consciousness about what it means to be black, there are different levels of cultural or ethnic consciousness, different degrees of ethnic identification and even ethnic denial and ethnic self disparagement. Blacks also differ in their awareness and opinions concerning Ebonics or black dialect, while some deny its existence and others promote its usage. These matters are obviously relevant to any programs that assist black parents in rearing black children. How to address this rich diversity of cultural issues and opinions is a major challenge.

There is also diversity within black communities regarding intergroup relations. Historically, blacks in America have struggled with the question of integration versus separatism. Black nationalism is a powerful force in some segments of black communities but not in others. As Senator Kennedy found out on his recent well-intentioned trip to South Africa, not all blacks look kindly on white folks who want to be helpful (Kennedy, 1985). Indeed, blacks who associate with whites are viewed suspiciously by many of their brothers and sisters.

These intergroup diversities with their undercurrents of reverse racism are important to the content, implementation and institutional sponsorship of black parenting programs. I will speak to these issues more fully later in this paper, but now I just want to indicate that they have created unique problems in developing the adapted programs. Because CICC is not a black organization and because I am white, the black folks who have

worked on this project have had to do so at some personal discomfort and risk. I too have experienced these discomforts and risks.

All of our shared uneasiness emanates from our country's history of white racism and discrimination. And this is a critical issue in programs for black parents. It not only gets expressed in terms of who should develop the programs but also in terms of questioning the nature of the programs themselves and why the programs are needed at all.

An important issue in regard to the nature of the programs is their value orientation. The standard programs are based on values of individual responsibility and individual achievement (Alvy, 1981, b). They are not based on other relevant value orientations such as the more communal African values that emphasize shared responsibility and shared achievement (Johnson, Brown, Harris and Lewis, 1980; Myers, 1982). Therefore, the very task of adapting the standard programs for black parents, a task which appears to keep the underlying value orientation of the programs in tact, is a source of controversy in and of itself.

The need for the programs is also a source of controversy. And what seems to be behind the question of why the programs are needed is a sensitivity to being considered inferior or deficient. Given the history of white racism and its many ugly manifestations, it is certainly understandable why black America would have this type of sensitivity.

Thus, any program for black parents is closely scrutinized

to see whether it is based on assumptions of inferiority or deficiency. In terms of adapting parenting skill programs, this issue gets expressed through asking whether the programs imply by their existance that blacks are deficient in parenting knowledge or skills.

But this question could just as easily be asked of the original programs and of white parents. That is, do the original programs, because they teach particular parenting ideas and skills, imply that white parents are inferior and deficient in parenting know-how and skills?

And the answer to both of these questions is "no." The answer is "no" because the question is inappropriate when applied to educational programs that teach new ideas and skills. It is like asking whether teaching a new subject to college students implies that they are inferior or deficient. Of course it doesn't. It only implies that there is some new or better organized information that should be helpful and that is why the course is being taught.

A more productive question in terms of racial discrimination and parenting programs is the question of equity or equal opportunity. If the majority group has available parenting programs that seem to help them raise children who succeed in this society, shouldn't minority groups have equal access to this social opportunity? And here the answer is a resounding "yes!"

And making these programs more relevant to minority groups

through program adaptations is one way of promoting this type of equal opportunity.

C. The Culturally-Adapted Parent Training Project

The project to adapt the programs consisted of a series of research and development activities (Alvy, Fuentes, Harrison and Rosen, 1980). There were parallel activities in developing the adaptations for black and Hispanic parents but only those that went into developing the black programs will be described here.

The project began by assembling a multi-racial staff, and a distinguished consultant group of black mental health, child development and educational experts. The consultants played crucial roles as critics and advisors. Their first task was to supply written critiques of the parenting texts from the standard programs. They scrutinized the texts in terms of whether the parenting ideas in each chapter should be reworked or emphasized for use with black parents (Alvy, 1981, c).

While the consultants were doing this critical review, the project staff was conducting intensive child rearing interviews with black and white parents (Alvy, Harrison, Rosen and Fuentes, 1982a). The data from these in-home interviews were intended to provide an empirical basis for making program adaptations. We had reviewed the handful of prior studies on black parenting (Baumrind, 1972; Cahill, 1966; Durrett, O'Bryant and Pennebaker, 1975; Duvall, 1971; Elder, 1962; Geismer and Gerhart, 1968;

Levine and Bartz, 1979) and had not found them particularly useful for our purposes. We wanted to obtain more descriptive data on the types of parenting practices and child rearing situations that were covered in the standard programs, and we wanted some measures of each group's world view or frame of reference regarding child rearing. We also wanted some data on how black parents relate to issues of blackness in their relationships with their children. None of the previous studies had dealt with specific blackness issues.

After the interview data was collected and summarized, the consultants and the staff came together for three days to review and discuss both the data and the consultant's program critiques. These were heated, illuminating and exciting sessions. They helped focus the project on the need to make the context of black parenting a major issue, and a project monograph was eventually written on this topic (Harrison and Alvy, 1982). The main point was that what makes black parenting different and unique is the context of racism and discrimination within which it is forced to take place. This point took on chilling significance during these working sessions because they were occurring at the same time that the bodies of murdered black children were being discovered in Atlanta.

Many of the observations and issues that were raised by the consultants were similar to those which scholars on black parenting had addressed in their books and articles (Comer and Poussaint, 1975; Harrison-Ross and Wyden, 1973; Johnson, Brown,

Harris and Lewis, 1980; McLaughlin, 1976; Rosser, 1978). These scholars carefully and poignantly documented how the history of racial discrimination had left its mark on black parenting, especially in terms of creating a traditional black approach to disciplining children where discipline had come to be equated with punishment, spanking and whipping. They spoke to the problems of developing positive personal and racial identities in the midst of white racism. They showed how many of the themes and practices in black parenting were developed as survival techniques, and they were ample in their respect for the courage and resourcefulness of black parents and families. These scholars also commented that many of the survival strategies of the past were inappropriate for the modern era where there are more opportunities and where upward mobility requires more sophisticated educational attainments. They stressed the need for changes in black parenting, and they advocated for the use of many of the parenting ideas and skills that are taught in the standard programs. They strongly emphasized that cultural change was essential for continued cultural viability and survival. The basic ideas of these scholars were eventually distilled into a Profile of Effective Black Parenting which helped inform the program adaptations (Alvy, 1981, a).

Many of the observations of the black parenting scholars found empirical substantiation in the data from the parent interviews (Alvy, Harrison, Rosen and Fuentes, 1982, a). The interviews were with 100 black lower and middle class parents

whose preschool children were enrolled in Head Start programs (Black Head Start), 100 predominately lower class white parents (White Low Income), and 100 predominately upper middle class white parents (White Higher Income).

The measure of world view or cultural frame of reference was a projective technique called the Associative Group Analysis technique where parents give their word associations to various parenting concepts, and where their associations are combined into components of meaning (Szalay and Bryson, 1973; Szalay and Maday, 1973; Szalay, 1978). Figure 1 contains the components of meaning and their relative salience for the Black Head Start and White Low Income groups in regard to the concept of Raising Children. For whites, themes of love, difficulty, parental fulfillment, responsibility and happiness are almost equally as salient. For the black parents, love, teaching and discipline predominate in their outlook on raising children.

Insert Figures 1 and 2 about here

In regard to the concept of Disciplining Children, Figure 2 reflects that for the low income whites punishment, spanking, difficulty and patience are the most salient themes, with talking, consistency, necessity, educating and loving also being important. For the black parents, punishment and spanking dominates, which seems to reflect what the black parenting scholars referred to as traditional black discipline. The black

image is also infused with themes of educating, obedience, talking and loving.

Insert Figures 3 and 4 about here

Figures 3 and 4 contain data on the reported parenting practices for the Black Head Start and the White Low and High Income Groups. Figure 3 details the parenting practices which each group employs when their preschool child does what they say or follows parental instruction. Figure 4 shows what the parents do when the same child is disobedient in a major way.

In regard to when children follow instructions, 24% of the black parents choose to do nothing. The reactions most frequently mentioned by those black parents who did respond was to show global appreciation, global praise of the child, specific praise of the child's behavior, and the giving of material rewards. The major ethnic and class differences were that fewer whites choose to do nothing and that more white parents delivered global appreciative comments and praise that was more specific to the child's behavior.

With respect to major disobedience, the main reported reaction on the part of black parents was to spank or slap with the hand. Black parents also reported a high usage of ordering and hitting children with objects, as well as discussion and preaching. The main ethnic and class differences were that more white parents of both classes reported using discussion, ordering

and removal of the child from the situation than did black parents, and more black parents reported hitting their children with objects, though this latter difference was less pronounced when comparing the black parents and the white low income group.

Other interview data on hitting children revealed that the vast majority of all parents (99% of the black, 95% of the white low income, and 82% of the white higher income parents) have hit their young children at one time or another. But the reasons appear to differ for blacks and whites. The black parents explained hitting more in terms of being a useful technique for achieving a wide range of child rearing objectives, and were more certain of its positive value. The white parents tended to hit more out of anger and frustration, and to be ambivalent about hitting.

Other interview data dealt with blackness issues and aspirations for child achievements. When asked if in raising their children they had done or said things to help their children know what it is to be black, only 51% of the black parents indicated that they had done so. When asked questions about their expectations for their children's educational and occupational attainments, 94% of the black parents indicated that they wanted their children to receive more education and higher status jobs than they have achieved.

These data, along with the consultants' recommendations and writings, and the Profile of Effective Black Parenting from the black scholars, were carefully reviewed for implications on how

to teach the standard programs in a more culturally sensitive and relevant way. A series of program adaptations were created which involved lengthening the standard programs to 15 instead of 10 training sessions. The data and information that formed the basis of the program adaptations were transformed into project monographs which were used as part of the training of the instructors who pilot tested the adapted programs.

D. Program Adaptations

The first adaptation was to create a new rationale for why black parents should take the programs (Alvy, Harrison, Rosen and Fuentes, 1982b). The rationale is called the Pyramid of Success for Black Children and it is taught as the opening topic during the first training session (see Pyramid diagram). It consists of engaging the parents in a call-and-response dialogue with the instructor in which the parents' life goals for their children are generated and discussed. The call-and-response teaching technique is similar to the minister-congregation exchanges that characterize many black church meetings.

Insert Pyramid diagram about here

Using this teaching technique, five life goals for black children are identified: achieving loving relationships, good jobs, good educations, helping the black community, and resisting

the pressures of the "street." The parents are then oriented that for black children to have a good chance at achieving these goals the children need to develop certain characteristics: high self-esteem, self-discipline, pride in blackness, good school and study habits, and good physical health habits. These characteristics are explained and discussed.

The parents are then further oriented that there is much that they can do to help their children develop these important characteristics. They can model and teach love and understanding, pride in blackness, self-discipline, good academic and health habits. After these ideas are explained and discussed, the parents are informed that the programs will provide them with some additional child rearing skills and ideas to help them model and teach. And in so doing the programs will help them stimulate the development of the child characteristics that are necessary for achieving the life goals for black children.

The second adaptation was to regularly relate the skills that are taught in the standard programs to the Pyramid of Success, so as to regularly reinforce the idea that as the parents are learning and using the skills they are moving their children towards the life goals. This is done by drawing the parents' attention back to the Pyramid every time a new skill or idea is taught, and showing the parents how the use of the idea or skill can promote the development of one or more of the important child characteristics.

The third major modification consisted of a series of new instructional units on topics of particular relevance to black parents. These units, which consume anywhere from 45 minutes to an hour and a half of instructional time, are intended to be presented at relevant junctures in the teaching of the standard program curricula. The units covered such topics as the Meaning of Disciplining Children (Traditional Black Discipline versus Modern Black Self-Discipline), Developing Self-Esteem and Pride in Blackness, Drugs and Our Children, Developing Sexually Responsible Children, Stimulating Academic Growth in Children, Stimulating Healthy Physical Development, Chit Chat Time, and Single Parenting. The unit on the Meaning of Disciplining Children includes the use and discussion of the projective word association technique, and relating the development of traditional black discipline to the slavery era and the development of modern black self-discipline to the civil rights era. The unit on Pride in Blackness raises consciousness and provides strategies for conveying pride and avoiding ethnic self-disparagement, as well as helping parents to communicate with their children over real life examples of racism. The drug unit, which is taught within the context of helping the child resist the pressures of the "street," is concerned with the modeling influence of parental drug usage and with the ways of detecting and avoiding child drug usage.

E. Pilot Testing of Adapted Programs

Several instructors who had previously been trained to deliver the standard programs received additional training in how to deliver the adapted versions (Alvy, Harrison, Rosen and Fuentes, 1982, b). There were two instructors each who had previously learned the Parent Effectiveness Training (P.E.T.) program, two who learned the Systematic Training for Effective Parenting (STEP) program, and two who were trained in the behaviorally-oriented child management program, Confident Parenting (CP). Half of the instructors were black and half were white. Their retraining included learning the new program content and teaching techniques, as well as some highly personal explorations of their ethnic and racial biases and understandings.

Each instructor was assigned to teach an adapted version of their particular program with a group of black Head Start parents from the Watts area of Los Angeles. Everyone was alerted to the possibility that there would be inconsistent parental attendance, as this had been CICC's and other agencies' experience in running multi-session, voluntary parenting classes in low income communities. And parental participation and attendance did turn out to be a major problem. One of the participating Head Start agencies was unable to attract enough parents to begin a class, and there was irregular attendance at the five classes that were run.

The evaluation procedures included a relatively brief pre-

test interview and a more extensive post test interview. A total of 48 parents were available for both interviews. Of this group, 19 had attended only three to six of the training sessions and they were designated as the Low Attendance Group. The other 29 parents had attended seven or more sessions and they constituted the High Attendance Group. Only two parents had attended all of the 15 training sessions.

The evaluation included a pre and post test administration of a measure of parental acceptance, Rohner's Parental Acceptance-Rejection Questionnaire (1980). The main reason for looking at program effects on parental acceptance was that research on parent-child relations has indicated that parental acceptance is a universally significant phenomena. Parental acceptance and rejection has been shown to influence many facets of child development: acceptance has been consistently associated with high self-esteem, stable social adjustment and academic achievement in children, and rejection in its various forms has been consistently associated with low self-esteem and emotional, behavioral and academic problems in children (Martin, 1975; Rohner, 1980).

Insert Table 1 about here

Table 1 presents the pre and post test acceptance/rejection scores for the Low and High Attendance groups. It shows that there were significant improvements for the High Attendance group

but not for the Low Attendance parents. In looking at the subscales that make up the total acceptance-rejection score on this measure (scales having to do with parental warmth, aggression, neglect and rejection), it appeared that what was reflected in the significantly improved acceptance scores for the High Attendance group was a greater sensitivity to their negative treatment of their preschool children and a stronger orientation to approach them in more positive ways. The High Attendance parents saw themselves as being less hostile and aggressive, less neglectful and rejecting, and as being more accepting of their preschool children.

During the post test interview, all of the parents were asked to reflect back on their relationships to their children prior to starting the class, and to rate and describe those relationships now. Table 2 contains the parental ratings of relationship changes with their preschool and older children. In every instance, the High Attendance parents rated their relationships as having improved more than the Low Attendance group. Statistical tests showed that the greater overall improvements in the total High Attendance group with both their preschool and older children were significant.

Insert Table 2 about here

When asked to explain exactly what they meant by saying that their relationships had improved, the High Attendance parents

gave a variety of explanations, most of which reflected a change in themselves or in their interactions with their children. They offered global explanations ("I learned the correct way to raise my child"), reasons which reflected improved communications with their children ("We talk to each other better now."), reasons that reflected better parental understanding ("I listen more to what he has to say and I understand him better."), reasons that showed better control of parental temper and less use of corporal punishment ("I learned to control my anger," "I whip less."), and reasons that reflected increases in affection ("I like her more," "I'm more affectionate."). The vast majority of parents attributed these changes to what they learned in the programs, with the parenting skills that were taught in the programs being the most frequently mentioned feature.

The parents were also questioned whether they discussed the programs with people outside of the class and whether they attempted to teach any of the parenting skills from the programs to these people. Among the High Attendance parents, all but one parent had discussed the program and two thirds had attempted to teach the skills. These 29 parents had discussed the program with a total of 162 people and had attempted to teach the skills to a total of 85 persons.

In terms of actual child rearing practices, more of the High Attendance parents reported using discussion and other non-forceful methods to deal with child disobediences, and fewer of these parents indicated that they used corporal punishment. The

High Attendance parents in the behaviorally-based child management program (CP) were the least likely to use physical force.

The High Attendance parents also reported fewer child behavior problems at the post test, but the differences between the High and Low groups were not large enough to reach statistical significance.

The parents were also questioned about how they deal with blackness issues, and they were also asked their reactions to each of the new instructional units. In regard to discussing blackness issues with their children, a very high percentage of High Attendance parents (83%) reported that they have discussed such matters as cultural heritage, racism, discrimination and racial pride with their children. They indicated that the cultural specifics that were taught in the programs and the generally positive value that the programs placed on discussing racial identity issues were their main reasons for sharing these matters with their children.

The reactions to the other new instructional units were uniformly positive. Of particular interest are the reactions of the parents who attended the sessions where the unit on Drugs and Our Children was presented. This unit not only presented basic information on drug usage and detection, but it also emphasized that by using and modeling the positive parenting skills that are taught in the programs that the parents would be helping their young children develop the self-discipline that is required to

resist overtures to use drugs.

Nearly all of the parents who attended these sessions commented on how useful they were, including those parents who knew most of the information and saw the sessions as "helpful refreshers." The comments of the less knowledgeable parents indicated that they learned about the extent of the drug problem in the black community and how destructive drugs can be. They learned some of the motives that stimulate children to use drugs, the early warning signs, and how to talk to children about drugs. The sessions appeared to make the parents more vigilant about drug usage, and, as one parent commented, to begin drug discussions very early with their children ("I learned to discuss drugs with the youngest earlier than with the oldest.").

Overall the parents who attended most of the sessions appeared to benefit in a variety of ways. They seemed to use what they learned from the programs to both expand and improve their relationships with their children. And there was evidence to suggest that their children changed as a result. There was also evidence that the parents became advocates for what the programs taught, since the majority shared and taught what they learned in the programs with other people in their families and community. Given the fact that so few of the High Attendance parents were actually exposed to the entire adapted programs, and the fact that this was the first time that the instructors taught the adapted versions, the results of the pilot test were very encouraging.

The programs, however, need further testing. The small number of parents involved in the pilot test, the attendance problems, the absence of control groups and longer term follow up data, the non-standard measures of program effects and the paucity of information on parent and child characteristics all speak to the need for a more thorough evaluation of the programs. CICC has been trying since 1982 to evolve a high quality evaluation project and to find an appropriate funding source.

I am happy to report that such a project has been developed and that the National Institute of Drug Abuse (NIDA) is supporting it with a three year research grant that began on June 1, 1985 (Alvy and Myers, 1985). The new research project will enable us to test the effectiveness of the adapted version of the behavioral child management program, Confident Parenting, with 300 black parents and their first grade children.

III NIDA Research Project

As was indicated earlier, NIDA is interested in parent training as a drug abuse prevention strategy. They are also interested in prevention strategies that are appropriate for ethnic minority populations. These interests took concrete shape in 1983 when NIDA published a research initiative in this area and convened a Technical Review conference to arrive at a state-of-the-art assessment of the potential of parenting and family life skills training programs to prevent drug abuse. I was

fortunate to be asked to participate at that Technical Review conference which was sponsored by NIDA's Prevention Research Branch (Rose, Battejes and Leukefeld, 1984).

The challenge in developing a parent training drug abuse prevention research project is to create a project that draws directly on the existing research and theories about drug abuse.

Research on drug-taking behavior has specified different stages (initiation into drug use, continuance, cessation and relapse) and has shown that a wide range of influencing variables are involved. Various theories have been offered to explain drug-taking behavior and different theories focus on different sets of influencing variables (Lettieri, Sayers and Pearson, 1980). All theories implicate family and parent variables as either distal or proximal influences in promoting or inhibiting drug-taking behavior.

The complexity of the phenomena is reflected in the Huba-Bentler (1982) developmental theory of drug usage. Their research-based theory specifies 13 domains of influencing variables:

1. Intimate Support System, including family, friends and peers.

2. Psychological Status Variables, like introversion-extroversion, rebelliousness, social adjustment, autonomy, depression, achievement striving, etc.

3. Environmental Stress.

4. Socioeconomic Resources.

5. Sociocultural Influence System.
6. Social Sanctions.
7. Social Expectations.
8. Self-Perceived Behavioral Pressure.
9. Behavioral Styles.
10. Product Availability.
11. Psychophysiology.
12. Genetics.
13. Organismic Status.

These domains of influence are interrelated in complex ways and some domains may be more important for different stages of drug-taking behavior. For example, "it appears that the intimate support system influences may be particularly important in the initiation of drug-taking behavior while organismic status changes due to the drug may more fully account for continued drug ingestion" (Huba, Wingard and Bentler, 1980, p. 31). The creators of this theoretical model contend that "any effective primary prevention program will have to address themes in many of the domains since the influences combine in many different ways to cause or preclude the initiation of use" (Huba, Wingard and Bentler, 1980, p. 34). Our NIDA study represents an application of this prevention strategy because it is designed to explore whether parent training can have an impact in several of the critical domains.

Our study also draws on the longitudinal research with black

parents and children that has been conducted over the last decade by Dr. Sheppard Kellam and his associates in Chicago. The results of the Kellam studies showed that certain social, psychological and academic characteristics of black first grade children, and certain family characteristics, were related to substance use ten years later (Kellam, Brown, Rubin and Ensminger, 1983). For example, they found that first graders who were rated by their teachers as being either aggressive or both shy and aggressive, were the highest users of marijuana ten years later. They also found that isolation and aloneness in mother-headed single parent families was related to teenage substance use.

These results compliment those from other retrospective and prospective studies that have found that a lack of parental acceptance, poor rule enforcement, parental substance use, parental depression, as well as a variety of family and life stresses, were risk factors for their children's teenage substance use (Gorsuch and Butler, 1976; Kandel, 1978; Newcomb, Huba and Bentler, 1983; Wingard, Huba and Bentler, 1980).

Putting all of this together, it can reasonably be assumed that a young child's future substance use, and particularly a young poverty-level black child's future use, involves a complex combination of socio-cultural variables (e.g., poverty, racial discrimination), parent variables (parental substance use, personality and child rearing), child variables (child's personality, social and academic status) and family variables

(family structure and stresses).

The adapted program can conceivably affect all of these variables either directly or indirectly. Figure 5 illustrates the expected program effects.

Insert Figure 5 about here

The program should directly influence parenting skills because its main purpose is to assist parents in refining and using positive parenting skills. If the skills are used regularly and properly, this should serve to enhance the quality of the parent-child relationship and promote consistent rule enforcement. Because the program places so much emphasis on the black parents' role as a model for black children, and because it conveys important information about drug abuse as part of a broader endeavor to enhance parent-child relations, the program should have direct effects on parental substance use. Being confronted with how important their behaviors are in shaping their children's behaviors, the parents may very well reduce, inhibit or stop their own substance use and/or become more vigilant in monitoring their children in this area.

Through the expected parental changes in drug-taking behavior and through their increased skillfulness in cultivating positive relations with their children, the program should also produce a variety of indirect effects. It is reasonable to assume that the expected parental changes in drug-taking behavior

should have an influence on their young children's attitudes towards drugs. It is also reasonable to expect positive changes in the children's behavior at home as a result of more skillful parenting.

Other indirect program effects, which could result from both the social support potential of the parenting group and the skills which are taught, could be to increase the parents' ability to cope with environmental stresses and to elevate their affective or emotional states.

A third type of program effect could be improvements in child functioning at school. The anticipated changes at home should have some influence on the children's adjustment and performance at school, though there are obviously many teacher and school issues that would also be operating. If there were program-related school improvements, the program would be an exceedingly powerful intervention.

If the program turns out to have all or some of these effects, it is not unreasonable to expect that the children will be better prepared as they grow up to resist overtures to use drugs, and that their drug-taking behavior during the teenage years would be different than that of children whose parents did not have an opportunity to take the program. It is also not unreasonable to expect that these children will be more emotionally stable and academically effective than peers whose parents didn't have this opportunity.

But these potential long term effects are beyond the scope

of the NIDA project. The project will only allow for follow up tests immediately after the programs end and one year later. However, if the results in regard to direct, indirect and teritary effects are positive, it seems likely that NIDA or another concerned agency would want to support a longer follow up study.

IV Conclusions

The NIDA project and its anticipated continuation will provide a great deal of additional information to scientifically test the effectiveness of the programs. But it will take years to obtain that information and, even if the information is as positive as anticipated, it will still be subject to hard-headed criticisms regarding experimental validity and generalizability. In short, the debate regarding the scientific significance of the programs will go on and on. And it should go on, and it should be informed by even better and more extensive evaluation studies.

But if the programs continue to exist mainly as objects of social and behavioral science scrutiny, they will effect the lives of only those few black families who happen to be available for the research studies. There is little doubt that these few families will benefit, because the programs empower black parents with the kinds of information and skills that are helpful in raising proud and healthy black children. But only a handful will be so empowered and so helped if the programs do not become

widely available.

And there is evidence that these types of self-help programs are needed on a wide scale basis.

The 1985 Children's Defense Fund publication on Black and White Children in America chronicles one appalling fact after another about how black children continue to lag behind white children on every indicator of well-being. For example, a black child is more likely today than just five years ago to come into this world without the benefits of prenatal care and to be born to an adolescent or single mother who is unemployed. His brothers and sisters are less likely to be immunized before starting school, less likely to be employed as teenagers and less likely to go to college. In short, life is worse for more black children and families today, at the very same time when the lives of most white children and families are improving.

As the Children's Defense Fund points out, the economic depression of black families not only makes them less able to provide the basics for their children, it makes them less able to shape a future for their children and to convince their children that the future is worth planning for.

And here's where these programs for black parents may be most helpful. Through their potential to empower black parents of all economic conditions with important information and skills, these programs could serve as vehicles for helping black parents convince their children that the future is worthwhile. The programs may not change the socioeconomic and political forces

that hold black families back, but they can provide a stronger knowledge base from which these forces can be fought.

There is evidence right now that the black leadership in our country would be receptive to these programs and to the self-help which they can stimulate and provide.

Over the last few years, national black organizations have become more concerned about the status of black families. In 1982 the Black Leadership Forum published a powerful document that emerged out of an overriding concern for the integrity of the black family. The document is entitled The Black Leadership Family Plan for the Unity, Survival and Progress of Black People (National Black Leadership Round Table, 1982). It contains detailed instructions for how black institutions and groups can work to provide for more secure and more achieving black families. The plan contains very specific instructions for black churches and labor organizations, youth groups, colleges, the black media, businesses, corporate professionals, civil rights groups, law enforcement and senior citizen groups, blacks in government, in entertainment, in sports, in prisons, in social, fraternal and greek letter organizations, black elected and appointed officials, and black political and voter registration groups. The instructions from the Leadership Forum makes it clear that there is much that these black groups can do to help black families. But there are no instructions for what the heads of black families, black parents, can do. Thus, while the guidelines are specific for institutions and groups that

influence black families, they are silent on what black parents can do. Possibly, the black parenting programs with the Pyramid of Success approach can fill this instructional void.

The 1982 Leadership Forum document is a call for blacks to help blacks. This theme was heard again last year at the Black Family Summit conference, where leaders of over 100 of America's top black organizations came together to discuss what the black community could do to strengthen black families (Jacob, 1984). They vowed to halt what they termed the crisis facing black families, a crisis which one leader referred to as threatening the survival of blacks as a race. They were clear that much of the crisis was a result of white racism. But they also recognized that some problems were self-inflicted. As one leader said, "We may have allowed our anger at what America has done to obscure our own need for self-discipline and strengthening community values...We may have neglected the fact that there is a lot we can do about our own problems ourselves."

This type of consciousness, and a commitment to strengthen black families, creates a new climate of receptivity to black parenting programs. Because of this, we cannot simply let these programs have their impact on the few black families who are involved in the research studies. Efforts must be made to make the programs more widely available and to have black organizations sponsor them.

For our part, CICC is planning to apply for funds that will enable us to transform the training materials into instructor and

parent manuals and books, and into audio and videotapes, that will facilitate the use of the programs nationwide. We are also planning to connect with national black organizations to develop sponsorship relations.

These activities, along with the stability that the NIDA research grant provides for our organization, may be what is needed to begin to bring the informational and training benefits of these programs to thousands of black families. Then it may be easier for black families to keep the faith and to instill in their children both the will and the means to overcome. And then all of us may find it easier to once again believe in the American dream of equality and justice for all.

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RAISING CHILDREN

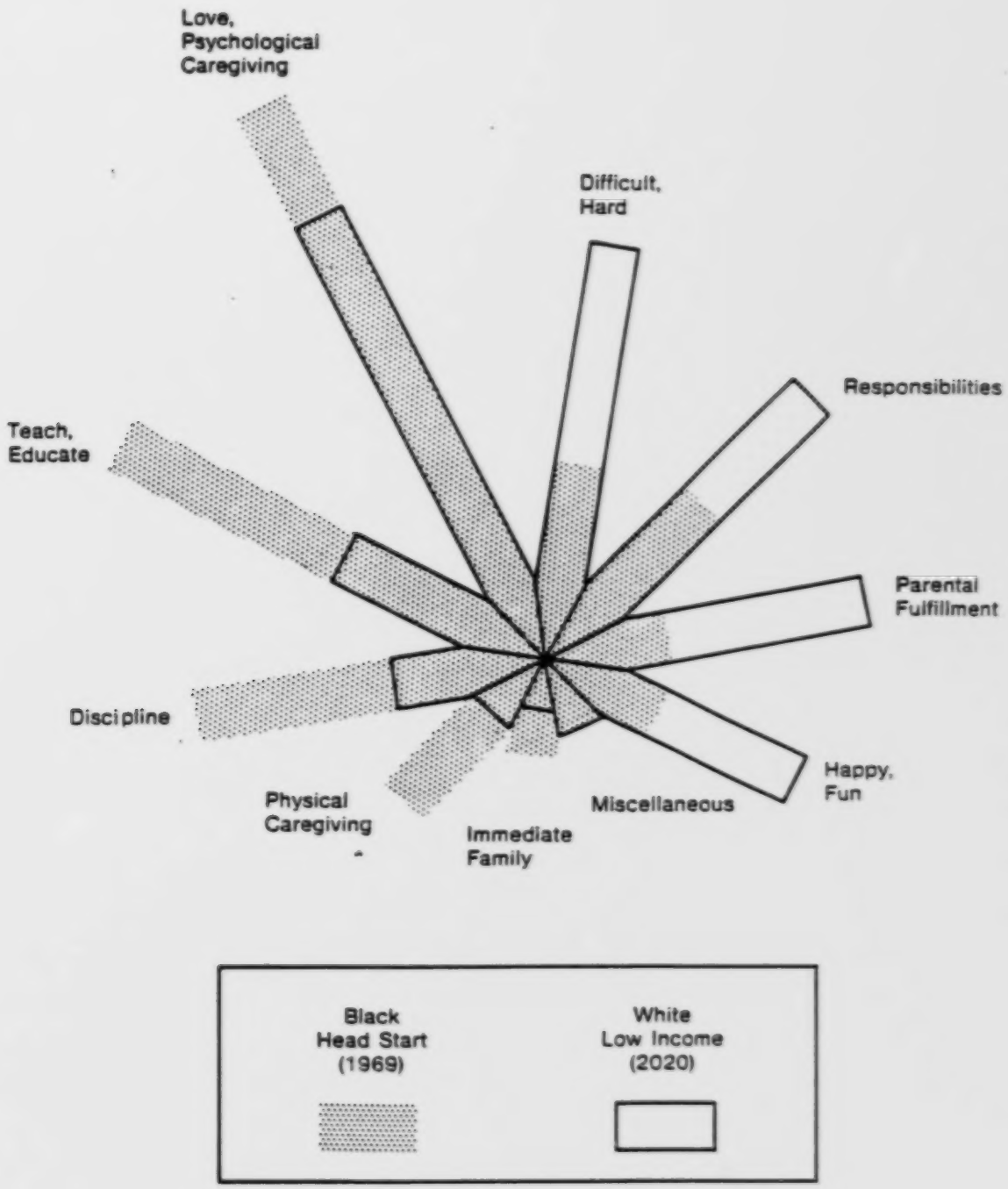

Figure 1: Semantographic presentation of concept RAISING CHILDREN, comparing Black Head Start (BHS) and White Low Income (WLI) parent groups. The size of each meaning component of the semantograph is the percentage of responses (weighted associations) for the components. The total weighted associations or concept score is in the key.

DISCIPLINING

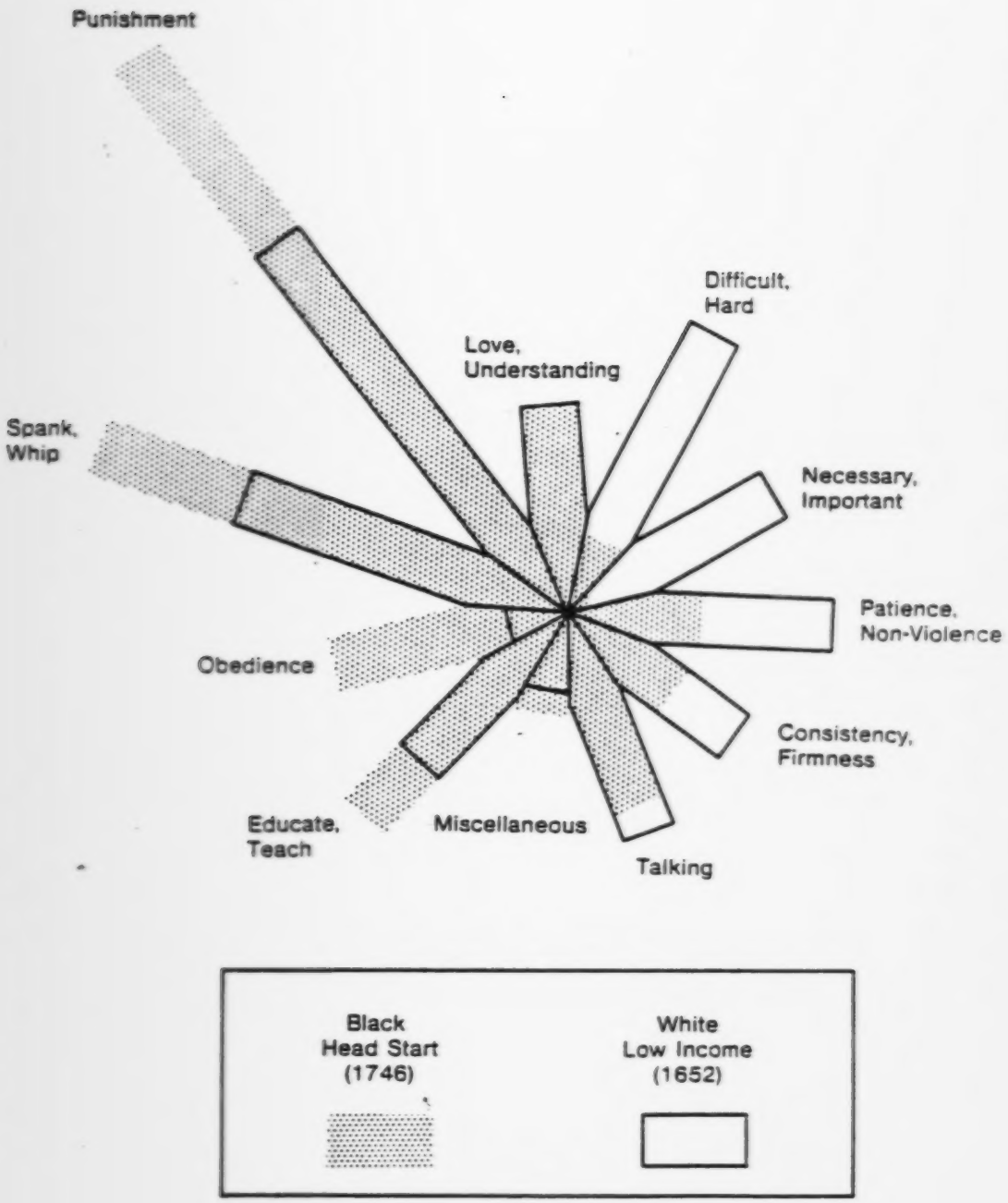

Figure 2: Semantographic presentation of concept DISCIPLINING, comparing Black Head Start (BHS) and White Low Income (WLI) parent groups. The size of each meaning component of the semantograph is the percentage of responses (weighted associations) for the components. The total weighted associations or concept score is in the key.

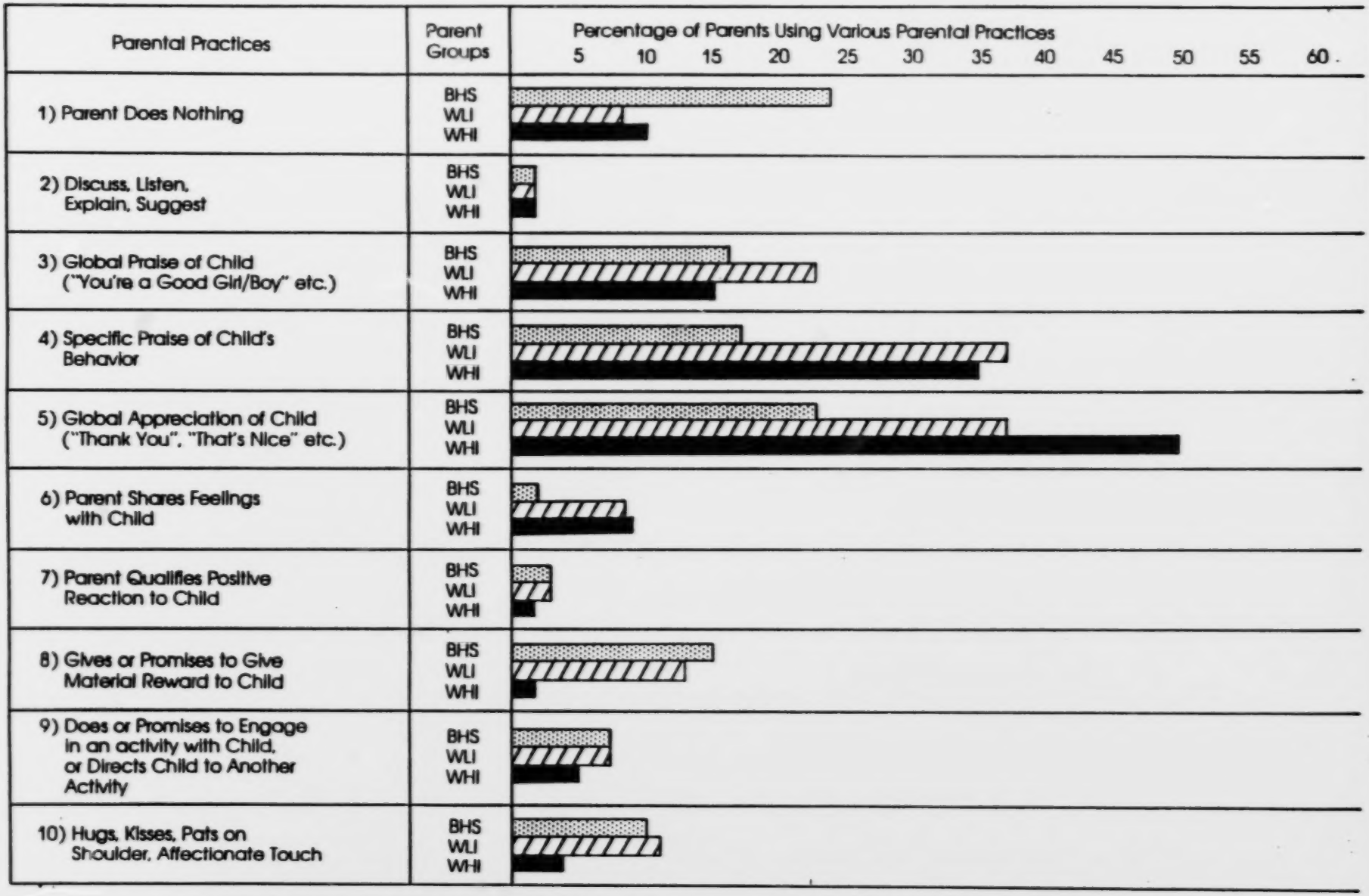
Parental Practices
Parent Groups
Percentage of Parents Using Various Parental Practices
5 10 15 20 25 30 35 40 45 50 55 60
1) Parent Does Nothing
2) Discuss, Listen, Explain, Suggest
3) Global Praise of Child ("You're a Good Girl/Boy" etc.)
4) Specific Praise of Child's Behavior
5) Global Appreciation of Child ("Thank You", "That's Nice" etc.)
6) Parent Shares Feelings with Child
7) Parent Qualifies Positive Reaction to Child
8) Gives or Promises to Give Material Reward to Child
9) Does or Promises to Engage in an activity with Child, or Directs Child to Another Activity
10) Hugs, Kisses, Pats on Shoulder, Affectionate Touch
BHS
WLI
WHI

Figure 3: Percentage of Black Head Start (BHS), White Low Income (WLI), and White Higher Income (WHI) parents who used various types of parental practices in response to their preschool children doing what they say (N = 100 parents per group). Percentages total more than 100% because some parents used more than one practice.

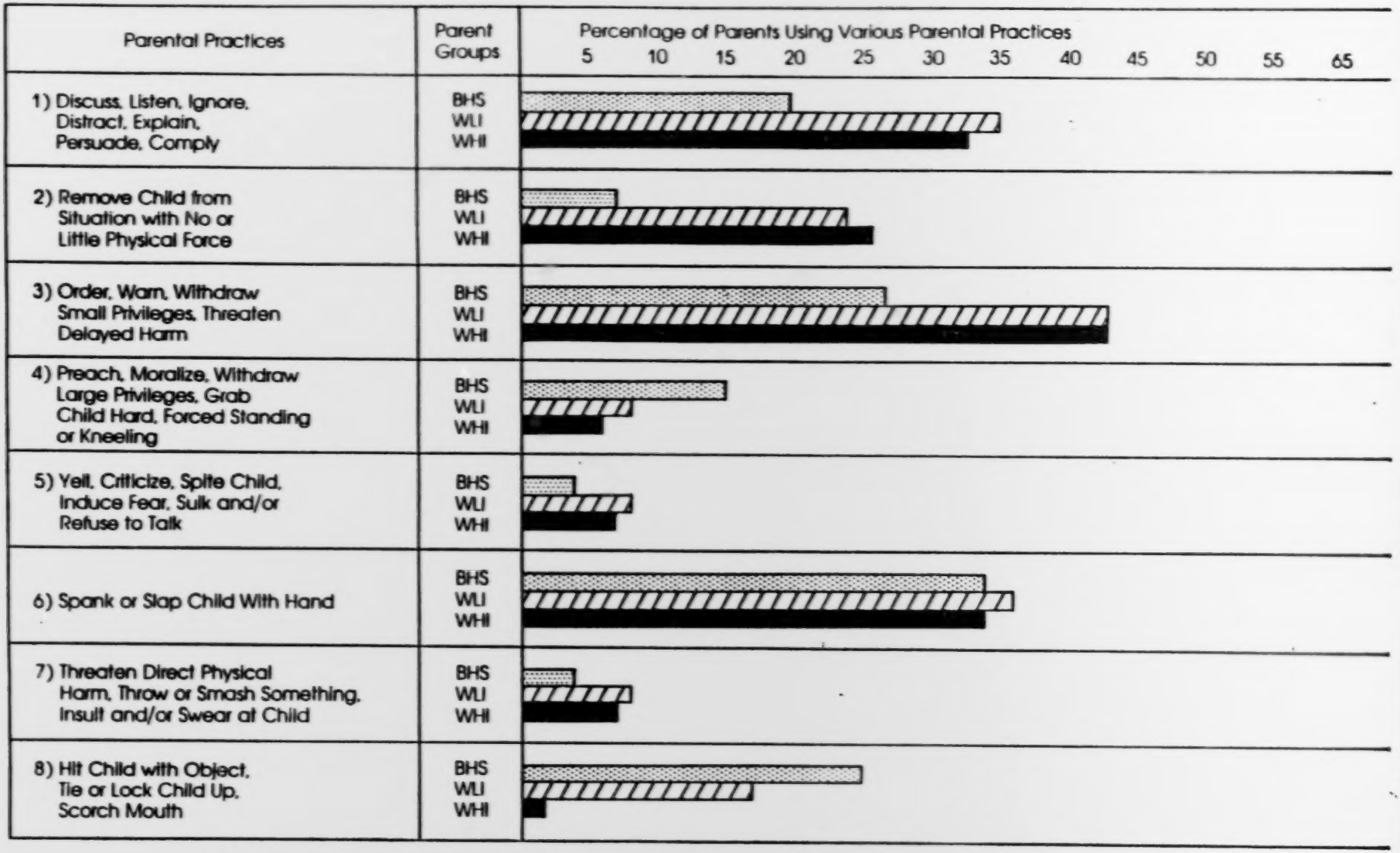
Parental Practices
Parent Groups
Percentage of Parents Using Various Parental Practices
5 10 15 20 25 30 35 40 45 50 55 65
1) Discuss, Listen, Ignore, Distract, Explain, Persuade, Comply
2) Remove Child from Situation with No or Little Physical Force
3) Order, Warn, Withdraw Small Privileges, Threaten Delayed Harm
4) Preach, Moralize, Withdraw Large Privileges, Grab Child Hard, Forced Standing or Kneeling
5) Yell, Criticize, Spite Child, Induce Fear, Sulk and/or Refuse to Talk
6) Spank or Slap Child With Hand
7) Threaten Direct Physical Harm, Throw or Smash Something, Insult and/or Swear at Child
8) Hit Child with Object, Tie or Lock Child Up, Scorch Mouth
BHS
WLI
WHI

Figure 4: Percentage of Black Head Start (BHS), White Low Income (WLI), and White Higher Income (WHI) parents who used various types of parental practices in response to a major disobedience on the part of their preschool children. Percentages are based on the total out of 100 parents per group who reported that a major disobedience had occurred: BHS = 67 parents, WHI = 99 parents, WHI = 100 parents. Percentages total more than 100% because more than one practice was used by some parents.

PYRAMID OF SUCCESS FOR BLACK CHILDREN

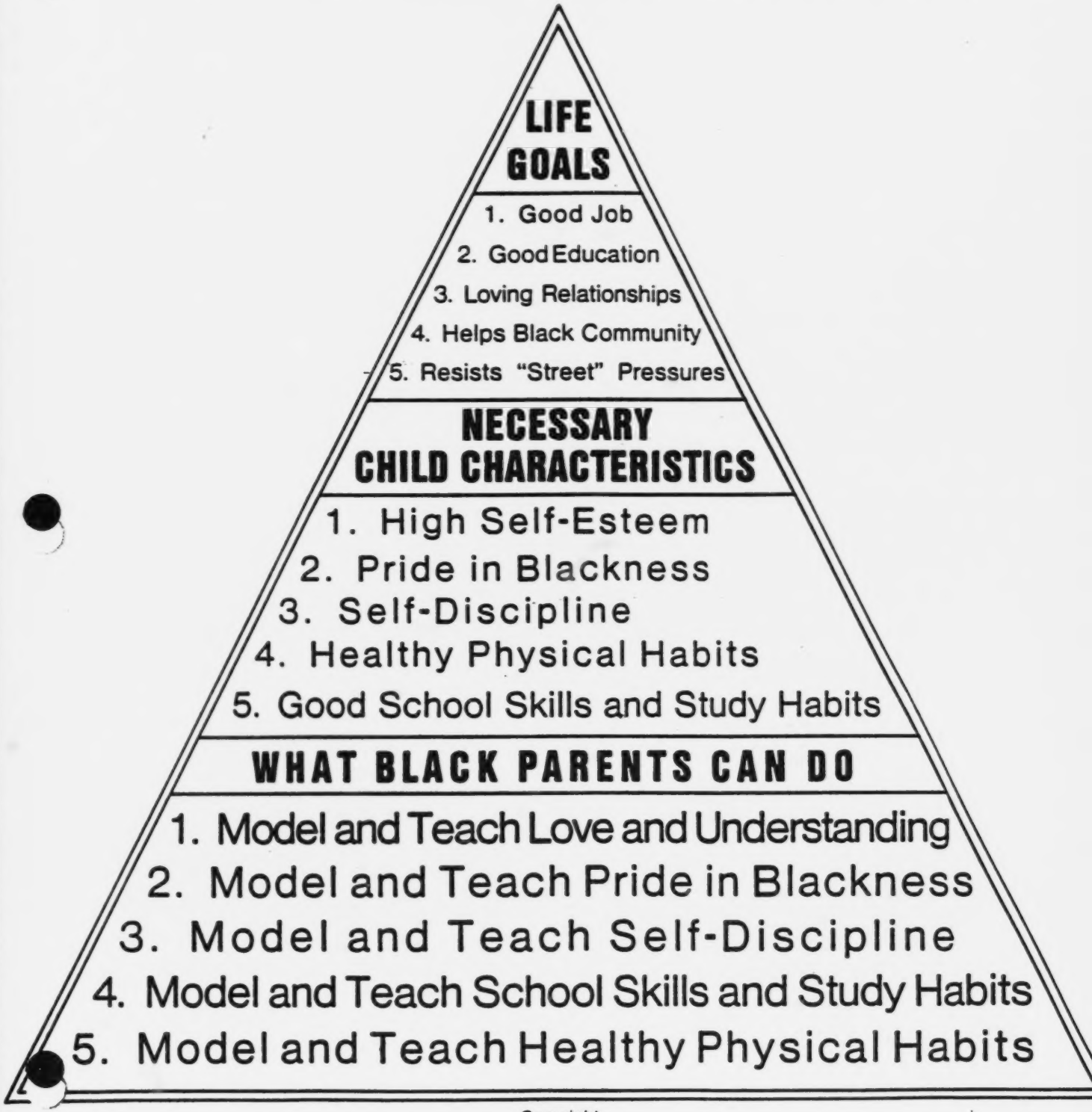
LIFE GOALS
1. Good Job
2. Good Education
3. Loving Relationships
4. Helps Black Community
5. Resists "Street" Pressures
NECESSARY CHILD CHARACTERISTICS
1. High Self-Esteem
2. Pride in Blackness
3. Self-Discipline
4. Healthy Physical Habits
5. Good School Skills and Study Habits
WHAT BLACK PARENTS CAN DO
1. Model and Teach Love and Understanding
2. Model and Teach Pride in Blackness
3. Model and Teach Self-Discipline
4. Model and Teach School Skills and Study Habits
5. Model and Teach Healthy Physical Habits

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Table 1

Total Parental Acceptance-Rejection Scores
on Pre and Post Tests and Tests of Significance
of the Difference Scores between Pre and Post Scores [a]

Parenting Group	N[b]	Pre	Post	T Score	P
Low Attendance	13	103.6	95.9	.50	NS
Total High Attendance	25	101.4	90.5	4.34	.01
Confident Parenting	6	110.5	94.5	2.95	.05
STEP	9	103.1	97.7	1.19	NS
PET	10	94.5	81.6	3.91	.01

a - A lower score means both more parental acceptance and less parental rejection.

b - N includes only those parents for whom there were both pre and post tests.

Table 2

Parental Ratings of Relationship Changes*

Parenting Groups	Preschool Child N	Mean	SD	Oldest Child N	Mean	SD
Low Attendance	19	3.89	.80	11	3.54	1.29
Total High Attendance	29	4.41	.68	21	4.29	.78
Confident Parenting	7	4.43	.78	6	4.33	.52
STEP	11	4.45	.68	5	4.00	1.00
PET	11	4.36	.67	10	4.40	.84

* Scale: 5=Much Better, 4=Better, 3=Same, 2=Worse, 1=Much Worse.

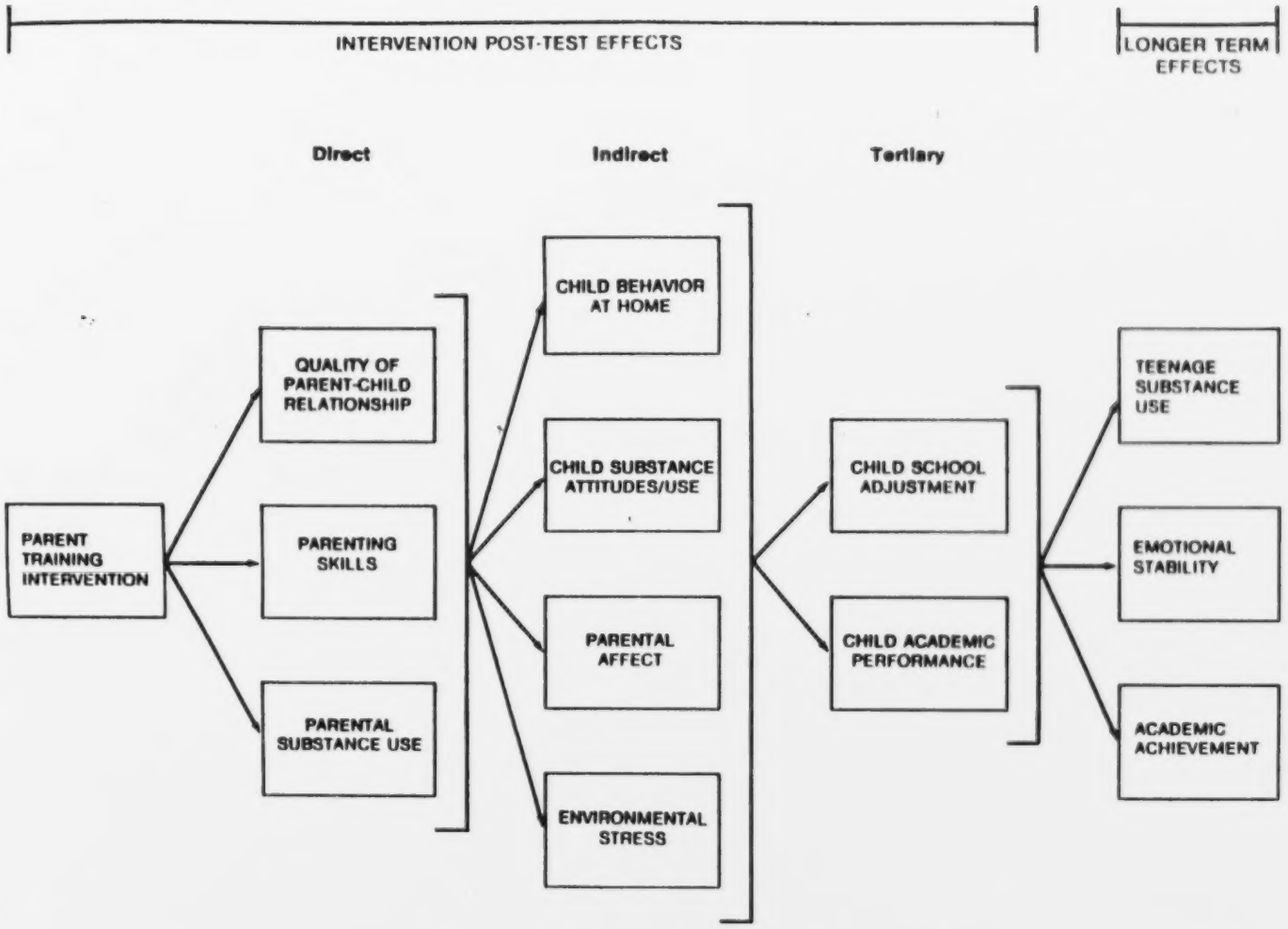

Figure 5: A MODEL OF THE PROJECT'S EXPECTED INTERVENTION EFFECTS.